



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

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November 7, 2016

To: Supervisor Hilda L. Solis, Chair
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From: Philip L. Browning
Director

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**VISTA DEL MAR COMMUNITY TREATMENT FACILITY QUALITY ASSURANCE
REVIEW**

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of the Vista Del Mar Community Treatment Facility (the CTF) in July 2015. The CTF has one site located in the Third Supervisorial District. The CTF provides services to the County of Los Angeles DCFS placed children and Probation youth, as well as children from other counties. According to the CTF's Program Statement, its stated purpose is, "to provide services to severely emotionally disturbed, abused and neglected children."

The QAR looked at the status of the placed children's safety, permanency, and well-being during the most recent 30 days and the CTF's practices and services over the most recent 90 days. The CTF scored at or above the minimum acceptable score in 8 of 9 focus areas: Permanency, Placement Stability, Visitation, Engagement, Service Needs, Assessment & Linkages, Tracking & Adjustment, and Teamwork. The OHCMD noted an opportunity for improved performance in the focus area of Safety.

In October 2015, the OHCMD Quality Assurance Reviewer met with the CTF to discuss the results of the QAR and to provide the CTF with technical support to address methods for improvement in the area of Safety. The CTF provided the attached approved Quality Improvement Plan (QIP) addressing the recommendations noted in this report.

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If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager at (213) 351-5530.

PLB:KR
KDR:rds

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Calvin C. Remington, Interim Chief Probation Officer
Louis Josephson, Ph. D., President/Chief Executive Officer, Vista Del Mar Child and Family Services
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

**VISTA DEL MAR COMMUNITY TREATMENT FACILITY
QUALITY ASSURANCE REVIEW
FISCAL YEAR 2015-2016**

SCOPE OF REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of the Vista Del Mar Community Treatment Facility (the CTF) in July 2015. The purpose of the QAR is to assess the CTF's service delivery and to ensure that the CTF is providing children with quality care and services in a safe environment which includes physical care, social and emotional support, education and workforce readiness, and other services to protect and enhance their growth and development.

The QAR is an in-depth case review and interview process designed to assess how children and their families are benefiting from services received and how well the services are working. The QAR utilizes a six-point rating scale as a *yardstick* for measuring the situation observed in specific focus areas. The QAR assessed the following focus areas:

Status Indicators:

- Safety
- Permanency
- Placement Stability
- Visitation

Practice Indicators:

- Engagement
- Service Needs
- Assessment & Linkages
- Teamwork
- Tracking & Adjustment

For Status Indicators, the QAR focuses on the focus child's functioning during the most recent 30-day period and for Practice Indicators, the QAR focuses on the CTF's service delivery during the most recent 90-day period.

For the purpose of this QAR, interviews were conducted with three focus children, three Department of Children and Family Services (DCFS) Children's Social Workers (CSWs), three CTF staff members and one CTF therapist.

At the time of the QAR, the CTF served 17 DCFS placed children and three Probation Youth. The focus children's average number of placements was seven, their overall average length of placement was seven months and their average age was 16. The focus children were randomly selected. One of the focus children was included as part of the sample for the Contract Administration Division's (CAD's) 2015-2016 Contract Compliance Review.

QAR SCORING

The CTF received a score for each focus area based on information gathered from on-site visits, agency file reviews, DCFS court reports and updated case plans, and interviews with the CTF staff, DCFS CSWs, service providers, and the focus children. The minimum acceptable score is 6 in the area of Safety and 5 in all remaining areas.

Focus Area	Minimum Acceptable Score	CTF QAR Score	CTF QAR Rating
Safety - The degree to which the CTF staff ensures that the focus children are free of abuse, neglect and exploitation by others in his/her placement and other settings.	6	4 - Fair Safety Status	The focus children have a minimally safe living arrangement with the present caregivers. Protective strategies are at least minimally adequate in reducing risks of harm. The focus children are at least minimally free from danger in other settings.
Permanency - The degree to which the focus children are living with caregivers, who are likely to remain in this role until the focus children reach adulthood, or the focus children are in the process of returning home or transitioning to a permanent home and the focus children, the CTF staff, caregivers, DCFS CSWs and if applicable, Department of Probation Officers (DPOs) support the plan.	5	5 - Good Status	The focus children have substantial permanence. The focus children live in a family setting that the focus children, CTF staff and team members have confidence will endure lifelong.
Placement Stability - The degree to which the CTF staff ensures that the focus children's daily living, learning and work arrangements are stable and free from risk of disruptions. Known risks are being managed to achieve stability and reduce the probability of future disruptions.	5	5 - Good Stability	The focus children have substantial stability in placement and school settings with only planned changes and no more than one disruption in either setting over the past 30 days.

Focus Area	Minimum Acceptable Score	CTF QAR Score	CTF QAR Rating
Visitation - The degree to which the CTF staff support maintaining important connections with significant family members/Non-Related Extended Family Members (NREFMs) through appropriate visitation and other means.	5	5 - Substantially Acceptable Maintenance of Visitation and Connections	Generally effective family connections are being sought for all significant family members/NREFMs through appropriate visits and other connecting strategies. All appropriate family members/NREFMs have regular visits.
Engagement - The degree to which the CTF staff working with the focus children and their family members/NREFMs and other team members for the purpose of building a genuine, trusting and collaborative working relationship with the ability to concentrate on the focus children's strengths and needs.	5	5 - Good Engagement Efforts	To a strong degree, a rapport has been developed, such that the CTF staff, DCFS CSWs, DPOs (if applicable) and the focus children feel heard and respected. Reports indicate that good, consistent efforts are being used.
Service Needs - The degree to which the CTF staff involved with the focus children work toward ensuring the focus children's needs are met and identified services are being implemented and supported and are specifically tailored to meet the focus children's unique needs.	5	6 - Optimal Supports and Services	An excellent array of supports and services fully matches intervention strategies identified in the focus children's case plans. The services are substantially helping the focus children make progress toward planned outcomes.
Assessment & Linkages - The degree to which the CTF staff involved with the focus children and their family members/NREFMs understand the focus children's strengths,	5	5 - Good Assessment and Understanding	The focus children's functioning and support systems are generally understood. Information necessary to understand the focus children's strengths,

Focus Area	Minimum Acceptable Score	CTF QAR Score	CTF QAR Rating
needs, preferences and underlying needs and services provided are regularly assessed to ensure progress is being made toward case plan goals.			needs and preferences is frequently updated.
Teamwork - The degree to which the "right people" for the focus children and their family members/NREFMs, have formed a working team that meets, talks and/or makes plans together.	5	6 - Optimal Teamwork	The team contains all of the important supporters and decision-makers in the focus children's lives, including informal supports. The team has formed an excellent, consistent working system that meets, talks and/or plans together.
Tracking & Adjustment - The degree to which the CTF staff involved with the focus children and their family members/NREFMs are carefully tracking the progress that the focus children are making, changing family circumstances, attainment of goals and planned outcomes.	5	6 - Optimal Tracking and Adjustment Process	Intervention strategies, supports and services being provided to the focus children are highly responsive and appropriate to changing conditions. Continuous monitoring, tracking and communication of the focus children's status is occurring.

The OHCMD conducted the last QAR of the CTF in October 2014, and noted an opportunity for improvement in the focus areas of Safety and Teamwork. In October 2015, the Quality Assurance Reviewer met with the CTF to discuss the results of the QAR. Based on the following information, it appears that the CTF showed improvement in the area of Teamwork, but continues to experience challenges in the area of Safety on their 2015-2016 QAR.

STATUS INDICATORS
(Measured over last 30 days)

Status Indicators	Safety	Permanency	Placement Stability	Visitation
2014-2015 Scores	5	5	5	6
2015-2016 Scores	4	5	5	5

In the area of Safety, the CTF fully implemented its 2014-2015 Quality Improvement Plan (QIP) to ensure proper reporting of special incidents, increase supervision of the placed children to ensure personal safety, and provide support and assistance to placed children in problem-solving to decrease self-harming behaviors. The CTF therapist also reported that the CTF provides a high staff-to-child ratio to ensure that the placed children are supervised at all times and that staff are available to immediately address concerns. The CTF therapist added that if the placed children pose a safety concern and are a danger to self or others, the CTF therapist contacts the Psychiatric Evaluation Team to have the placed children evaluated.

Although two focus children and their DCFS CSWs reported no safety concerns, the CTF fell below the minimum score in the area of Safety, as there is still a child safety concern as the third focus child reported that she did not feel safe at the CTF. The focus child shared that one staff member had cursed at her and had made diminishing comments. The Quality Assurance Reviewer reported the incident to the Child Protection Hotline. The report was taken as "Information to DCFS CSW" only. The Quality Assurance Reviewer also reported the incident to the CTF administrator. The CTF administrator reported that she was aware of the incident and had given the staff member a written warning. The CTF administrator also reported that the involved staff member is meeting with the CTF supervisor weekly for supervision, and expectations of performance have been reviewed with the staff member. Additionally, the CTF provided Relationship Based in-service training, which emphasizes the importance of relationship-based interactions, to all staff.

In the areas of Permanency, Placement Stability, and Visitation, the CTF continues to provide good quality services and stability for the focus children. The CTF is providing services that correspond with each focus child's permanency plan, Planned Permanent Living Arrangement. The CTF demonstrates supportive efforts to assist the focus children in achieving their permanency goals. The focus children reported being taught new coping skills and engaging in more appropriate behaviors, which will assist them in transitioning to a less restrictive placement setting. None of the focus children experienced placement disruptions, and each focus child reported feeling supported by staff. Additionally, the CTF is effective in maintaining ties between the focus children and their family members.

PRACTICE INDICATORS
(Measured over last 90 days)

Practice Indicators	Engagement	Service Needs	Assessment & Linkages	Teamwork	Tracking & Adjustment
2014-2015 Scores	5	5	5	4	5
2015-2016 Scores	5	6	5	6	6

In the area of Teamwork, the OHCMD found that the CTF had implemented the 2014-2015 QIP to ensure the focus children know who their treatment team is comprised of and that focus children regularly participate in the treatment team meetings. The CTF holds face-to-face team meetings regularly and as frequently as needed, as well as at critical points to develop treatment plans for the focus children. The CTF ensures that all team members, which include the focus children; DCFS CSWs; family members, if appropriate; CTF therapist; CTF staff; and the focus children's psychiatrist are all invited to participate in the team meetings at the CTF to discuss each of the focus children and their ongoing treatment plan. Each of the focus children reported being aware of who their team members were and participating in regular team meetings at least once a month. The focus children also shared that the CTF therapist involves them in discussions regarding implementing or modifying their Needs and Services Plan goals and informs them of when the treatment team meetings will take place. Additionally, the DCFS CSWs for the focus children reported being invited to monthly team meetings at the CTF, and that family members have also been invited and have participated. The focus children's team has formed an excellent, consistent working system that meets, talks, and plans together.

In the areas of Engagement and Assessment & Linkages, the CTF demonstrated good, consistent efforts to engage the focus children and key people in the decision-making process, as well as evaluating the focus children's needs and linking the focus children to appropriate services. The CTF makes efforts to ensure that rapport has been developed between the CTF staff, DCFS CSWs, and the focus children. The CTF staff, DCFS CSWs, and focus children reported feeling heard and respected. The CTF therapist utilizes good, consistent efforts to engage the focus children, DCFS CSWs, family members, key supporters and significant individuals in the focus children's lives. The CTF therapist has built a good rapport with each of the team members. The CTF therapist contacts the DCFS CSWs at least once a week and involves them in the development of the treatment plans for the focus children. The DCFS CSWs for each of the focus children reported that they have a good working relationship with the CTF therapist who informs them of the focus children's progress. One DCFS CSW shared that the CTF therapist engages the focus child's mother and father and includes them in the development of the focus child's treatment plan, as they attend meetings and are informed of her progress.

The CTF provides an excellent array of supports and services to the focus children, and the intervention strategies, supports, and services provided to the focus children are highly responsive and appropriate to changing conditions. The CTF also does optimally in the Tracking & Adjustment of the focus children's treatment plan by continuously assessing

their treatment needs, appropriateness of services and progress. Services provided to the focus children include weekly individual therapy, weekly group therapy, monthly psychiatric evaluation and medication management, and they attend the CTF's on-grounds non-public school. Two of the focus children shared that they are benefitting from the support and services they are receiving. One focus child stated that the CTF helps her with decreasing her anger outbursts. The first focus child reported that the CTF therapist is very helpful and that the CTF staff is supportive, cares about her, and keeps her safe. The CTF therapist reported that the focus child has been doing very well over the last few months and is possibly ready to transition into a lower level of care. The second focus child shared that the CTF meets her needs. She also stated that the CTF staff assist her with decreasing her self-harming behaviors and keep her safe. The DCFS CSWs reported that the CTF therapist maintains regular contact with them and includes them in developing and implementing the treatment goals for the focus children. They also shared that when the goals do not appear to be appropriate or meet the focus children's needs or need to be modified, they work together with the CTF therapist to track and adjust the focus children's treatment plans.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In September 2015, the OHCMD provided the CTF with technical support related to the 2015-2016 Contract Compliance Review findings in the areas of Facility and Environment, Personal Rights and Social/Emotional Well-Being and Personal Needs/Survival and Economic Well-Being. Technical support was provided on how the CTF can ensure food is properly labeled and expired perishable food is disposed of; personal rights of placed children are respected; and that placed children are provided with necessary personal hygiene products of their preference without having to purchase the items themselves.

In October 2015, the Quality Assurance Reviewer met with the CTF to discuss the results of the QAR and to provide the CTF with technical support addressing methods on improving in the area of Safety. The CTF submitted the attached approved QIP. The OHCMD Quality Assurance staff will continue to provide ongoing technical support, training, and consultation to assist the CTF in implementing their QIP.

Philip M. Stein
Chair, Board of Directors

Louis Josephson, Ph.D.
President/Chief Executive Officer



VISTA DEL MAR
CHILD & FAMILY SERVICES

November 4, 2015

Adelina Arutyunyan, MSW
Children Services Administrator I
DCFS-Out-of-Home Care Management Division
9320 Telestar Avenue, Suite 216
El Monte, CA 91731

Re: Vista Del Mar CTF Quality Improvement Plan

Dear Ms. Arutyunyan:

As per the Quality Assurance Review meeting held on 10/29/2015, the following is the Quality Improvement Plan for the area where improvement is needed:

Safety

- CTF- Staff member had previously been written up on 5/5/2015 for engaging in a power struggle with resident and for making a diminishing comment. Subsequently, on 9/30/2015, he received a FINAL WARNING for allegedly making another inappropriate comment to a resident (please see attached write-up). This writer met with him on 9/25/2015 to discuss and although he denied making comment to resident, he did apologize directly to that resident. He understands that further violation of policy will result in termination of employment. His supervisor is continuing to meeting weekly with him for supervision in order to further assist him with meeting job requirements in terms of his interactions with clients. Supervisor has emphasized that any further infractions will result in termination of employment. In supervision, supervisor has been focusing with him identifying possible triggers and optimal ways to address residents when he feels triggered. It should also be noted that there have been frequent reviews with all staff regarding expected interactions with children. Our focus has been on a relationship based DBT approach emphasizing validation, being non-judgmental and supportive. Staff who do not demonstrate the above qualities are in violation of Vista Del Mar policy and will be held accountable for infractions. All staff meet weekly with their supervisors and supervisor's document weekly supervision sessions. Importance of relationship based interactions are emphasized. (please see attached sign in sheet from the last DBT/Relationship Based in-service training held on 9/30/and 10/2/2015).